

ABSTRACT

Aim of the Study

The aim of the study is to determine the frequency of diagnoses of significant findings by upper GI endoscopy with ultra-sonogram proven gall stone disease with chronic dyspeptic symptoms.

Objectives

1. To study the prevalence of symptomatic dyspepsia in patients with cholelithiasis.
2. To identify the co-incidence of gallstones with different upper GI pathology and to evaluate the role of upper GI endoscopy in patients with symptomatic gall stone disease.
3. To study the age distribution on upper GI endoscopy in cholelithiasis patients with dyspepsia.
4. To study sex distribution of various pathogenesis in upper GI endoscopy.
5. To highlight the importance of endoscopic evaluation as a pre-op investigation in patients with dyspepsia and cholelithiasis.

Hypothesis

1. The incidence of clinically significant in upper GI endoscopy in cholelithiasis Patients with dyspeptic complaints are less compared to the incidence of normal study
2. The prevalence of positive endoscopic findings in symptomatic cholelithiasis disease patients are higher in women.
3. The prevalence of positive findings are increasing with age.

METHODOLOGY

Using a OGD scope upper gastrointestinal tract was examined and results were observed and tabulated.

CONCLUSION

The prevalence of significant findings in upper gastrointestinal scopy of ultrasound proven symptomatic gall stone disease with chronic dyspepsia as symptoms is relatively higher than the prevalence of normal study.

The significant findings in symptomatic patients prevalence is higher in females than males in all age groups.

The prevalence of significant lesions was highest in the age group of >40 years. Increase in the age will be increase in the associated significant findings.

The prevalence of gastritis as a single diagnoses is more prevalent in this part of the world and in our institution.

Gall stone disease clinical symptoms is complex and may resemble other upper gastrointestinal disease. So using a upper GI scope should be made routine for all gall stone disease patients prior to elective surgical cholecystectomy. As it helps to identify other potential medically treatable diseases and hence cholecystectomy rates can be reduced. The postoperative persistence of symptoms will reduce due to single investigation. Thus upper gastrointestinal endoscopy has a very important and vital role in initial evaluation and investigation of patients with symptomatic gall stone disease.